



**Please tick (✓) one of the following 请打勾(✓)以下其中一项:**

Monthly Donation 月捐 Amount 数额 : .....

Annual Donation 年捐 Amount 数额 : .....

General Donation 乐捐 Amount 数额 : .....

Annual Membership Fee 会员年费

Lamp Offering 点灯

**DONOR'S / MEMBER'S PARTICULARS 捐款者 / 会员资料**

Name 名字 :

Membership No 会员编号 :

Contact No 联络号码 :

Email 电邮 :

**PART 1 – FOR APPLICANT'S COMPLETION 由申请者填写**

Date :

Name of Billing Organisation ("BO") : **Sagaramudra Buddhist Society**

Name of Bank :

Name of Applicant :

Payment limit<sup>1</sup> :

Contact No :

<sup>1</sup> Maximum amount to be deducted per transaction

(a) I/We hereby instruct the Bank to process the BO's instructions to debit my/our account.

(b) The Bank is entitled to reject the BO's debit instruction if my/our account does not have sufficient funds and charge me/us a fee for this. The Bank may also at its discretion allow the debit even if this results in an overdraft on the account and impose charges accordingly.

(c) This authorisation will remain in force until

- (i) the Bank's written notice sent to my/our address last known to the Bank;
- (ii) upon the Bank's receipt of my/our written revocation; or
- (iii) upon the Bank's receipt of the notice of expiry from BO.

My/Our Account Name :

My/Our Company Stamp/Signature(s)/Thumbprint(s):

Note: As in Financial Institution's record. For thumbprints, please go to the branch with your identification.

My/Our Account Number :

**PART 2 – FOR BILLING ORGANISATION'S COMPLETION 由海印学佛会填写**

Bank	Billing Organisation's Account No.
7   3   3   9	5   0   9   0   7   7   8   8   9   0   0   1

Billing Organisation's Customer's Ref No.

SWIFT BIC	Account No. To Be Debited

**PART 3 – FOR BANK'S COMPLETION 由银行填写**

To: SAGARAMUDRA BUDDHIST SOCIETY

This Application is hereby REJECTED (please tick) for the following reason(s):

\*Please delete where applicable

Signature/Thumbprint\* differs from bank's records

Wrong account number

Signature/Thumbprint\* incomplete/unclear\*

Amendments not countersigned by customer

Account operated by signature/thumbprint\*

Others: \_\_\_\_\_

Name of Approving Officer

Authorised Signature

Date